

FEC  
FORM 3REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For An Authorized CommitteeRECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS15 OCT 20 AM 11:09  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

JULIANNE MN INC

ADDRESS (number and street) ▼

8525 Mission Hills Lane

Check if different  
than previously  
reported. (ACC)

Chanhassen

MN

55317

2. FEC IDENTIFICATION NUMBER ▼

C C00548446

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

MN

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

X October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M in the State of

5. Covering Period M M D D Y Y through M M D D Y Y  
07 01 2015 09 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles Erickson

Signature of Treasurer

Charles Erickson

Charles Erickson

Date

10 15 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3  
(Revised 02/2003)

# SUMMARY PAGE

## of Receipts and Disbursements

Write or Type Committee Name

**JULIANNE MN INC**

Report Covering the Period: From: <sup>M</sup> 07 <sup>D</sup> 01 <sup>Y</sup> 2015 To: <sup>M</sup> 09 <sup>D</sup> 30 <sup>Y</sup> 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	10.00	1057524.13
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	34860.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	10.00	1022664.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	37.62	1030534.00
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	396.12
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	37.62	1030137.88
8. Cash on Hand at Close of Reporting Period (from Line 27)...	1079.64	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) ..	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) ..	50473.29	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

201510210200301983

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

**JULIANNE MN INC**

Report Covering the Period: From: <sup>M M</sup> 07 <sup>D D</sup> 01 <sup>Y Y</sup> 2015 To: <sup>M M</sup> 09 <sup>D D</sup> 30 <sup>Y Y</sup> 2015

I. RECEIPTS	COLUMN A Total This Period		COLUMN B Election Cycle-to-Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (use Schedule A)...	\$	\$ 0.00	\$	\$ 400407.41
(ii) Unitemized .....	\$	\$ 10.00	\$	\$ 636016.72
(iii) TOTAL of contributions from individuals . ▶	\$	\$ 10.00	\$	\$ 1036424.13
(b) Political Party Committees...	\$	\$ 0.00	\$	\$ 0.00
(c) Other Political Committees (such as PACs) ...	\$	\$ 0.00	\$	\$ 21100.00
(d) The Candidate .....	\$	\$ 0.00	\$	\$ 0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	\$	\$ 10.00	\$	\$ 1057524.13
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..				
	\$	\$ 0.00	\$	\$ 0.00
13. LOANS:				
(a) Made or Guaranteed by the Candidate...	\$	\$ 550.00	\$	\$ 0.00
(b) All Other Loans...	\$	\$ 0.00	\$	\$ 0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	\$	\$ 550.00	\$	\$ 0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ...				
	\$	\$ 0.00	\$	\$ 396.12
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....				
	\$	\$ 445.00	\$	\$ 6072.91
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... ▶				
	\$	\$ 1005.00	\$	\$ 1063993.16

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period		COLUMN B Election Cycle-to-Date	
17. OPERATING EXPENDITURES...	,	,	37.62	1030534.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	,	,	0.00	0.00
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate...	,	,	0.00	0.00
(b) Of All Other Loans .....			0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	,	,	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees...	,	,	0.00	34860.00
(b) Political Party Committees...			0.00	0.00
(c) Other Political Committees (such as PACs) ..	,	,	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	,	,	0.00	34860.00
21. OTHER DISBURSEMENTS ...	,	,	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	,	,	37.62	1065394.00

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	112.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1005.00
25. SUBTOTAL (add Line 23 and Line 24)...	1117.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	37.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	1079.64

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 5 OF 12	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JULIANNE MN INC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Julianne Ortman</b>		Date of Receipt M M / Y Y 08 03 2015	
Mailing Address 8525 Mission Hills Lane		Transaction ID : SA13A.4256	
City State Zip Code Charhassen MN 55317	Amount of Each Receipt this Period 550.00		
FEC ID number of contributing federal political committee. <b>C</b> C00548446		Loan	
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 14100.00		
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M	
Mailing Address		Amount of Each Receipt this Period	
City State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M	
Mailing Address		Amount of Each Receipt this Period	
City State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		550.00	
<b>TOTAL</b> This Period (last page this line number only).....		550.00	

201510210200301986

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JULIANNE MN INC**

<b>A.</b> Full Name (Last, First, Middle Initial) Nova List		Date of Receipt M M / D D Y Y 07 30 2015	
Mailing Address 20130 Lakeview Center Plaza Suite 300		Transaction ID : SA15.4252	
City Ashburn	State VA	Zip Code 20147	Amount of Each Receipt this Period 445.00
FEC ID number of contributing federal political committee. C		List Rental , , 445.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , , 924.09		
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date , ,		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		, , 445.00	
<b>TOTAL</b> This Period (last page this line number only).....		, , 445.00	

201510210200301987

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 7 OF 12

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
**JULIANNE MN INC**

Transaction ID : SC/10.4245

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**Julianne Ortman**

Election: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

8525 Mission Hills Lane

City

State

ZIP Code

Chanhassen

MN

55317

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

8400.00

0.00

8400.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

12<sup>M</sup>

30<sup>D</sup>

2014

M N

4.00

% (apr)

☒

Yes

☐

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

,

,

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

,

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

,

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

,

,

**SUBTOTALS** This Period This Page (optional)...

8400.00

**TOTALS** This Period (last page in this line only) ..

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3)

## LOANS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 8 OF 12

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
JULIANNE MN INC

Transaction ID : SC/10.4124

LOAN SOURCE Full Name (Last, First, Middle Initial)

Julianne Ortman

Election: 2014

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address  
8525 Mission Hills Lane

City State ZIP Code  
Chanhassen MN 55317

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3350.00	0.00	3350.00

### TERMS

Date Incurred	Date Due	Interest Rate	Secured:
01 <sup>M</sup> 12 <sup>D</sup> 2015 <sup>Y</sup>		4.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)... 3350.00

**TOTALS** This Period (last page in this line only) ..

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201510210200301989



**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 9 OF 12

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
**JULIANNE MN INC**

Transaction ID : SC/10.4204

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**Julianne Ortman**

Election: 2014

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address  
 8525 Mission Hills Lane

City State ZIP Code  
 Chanhassen MN 55317

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1800.00	0.00	1800.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 08 2015	M M / Y	4.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , ,
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , ,
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , ,
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: , ,

**SUBTOTALS** This Period This Page (optional)... ▶ , , 1800.00

**TOTALS** This Period (last page in this line only)... ▶ , ,

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201510210200301990

**SCHEDULE C (FEC Form 3)**  
**LOANS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 10 OF 12

FOR LINE NUMBER:  
(check only one)

☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)  
**JULIANNE MN INC**

Transaction ID : SC/10.4256

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

**Julianne Ortman**

Election: 2014

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address  
8525 Mission Hills Lane

City State ZIP Code  
Chanhassen MN 55317

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
550.00	0.00	550.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 03 2015		4.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional)...	550.00
<b>TOTALS</b> This Period (last page in this line only)...	14100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

201510210200301991

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 11 OF 12

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**JULIANNE MN INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Aristotle**

Nature of Debt (Purpose):

Campaign Software

Mailing Address 205 Pennsylvania Ave SE

City State

Washington

Zip Code

DC

20003

Outstanding Balance Beginning This Period

Transaction ID : SD10.4228

, , 1800.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

, , 0.00

, , 0.00

, , 1800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Century Promotional Advertising LLC**

Nature of Debt (Purpose):

Promotional Prints

Mailing Address 2727 26th Ave S

Suite 140

City State

Minneapolis

Zip Code

MN

55406

Outstanding Balance Beginning This Period

Transaction ID : SD10.4230

, , 2483.41

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

, , 0.00

, , 0.00

, , 2483.41

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Dorothy Fleming**

Nature of Debt (Purpose):

Expense Reimbursement

Mailing Address 3101 Wendhurst Ave

City

St. Anthony

State

MN

Zip Code

55418

Outstanding Balance Beginning This Period

Transaction ID : SD10.4111

, , 3120.53

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

, , 0.00

, , 0.00

, , 3120.53

1) **SUBTOTALS** This Period This Page (optional) ...

, , 7403.94

2) **TOTALS** This Period (last page this line number only) ...3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 12 OF 12

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**JULIANNE MN INC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**P2B Strategies**

Nature of Debt (Purpose):

Promotional Printing Services

Mailing Address 4750 E 53rd St

City State

Zip Code

Minneapolis

MN

55417

Outstanding Balance Beginning This Period

Transaction ID : SD10.4114

15836.32

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

15836.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sunrise Data Services**

Nature of Debt (Purpose):

Direct Mail Printing

Mailing Address 20130 Lakeview Center Plaza  
Suite 300

City State

Zip Code

Ashburn

VA

20147

Outstanding Balance Beginning This Period

Transaction ID : SD10.4116

2600.25

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

2600.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Targeted Creative Communications Inc**

Nature of Debt (Purpose):

Promotional Mailing

Mailing Address 106 S Columbia St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

Transaction ID : SD10.4117

10532.78

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

10532.78

1) **SUBTOTALS** This Period This Page (optional) ...

28969.35

2) **TOTALS** This Period (last page this line number only) ...

36373.29

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

14100.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

50473.29

201510210200301994

CHARLES ERICKSON  
140 MILL RD  
WACONIA, MN 55387-9515



Label 107R, January 2008

SCREENED  
BY THE SENATE  
POST OFFICE

U.S. POSTAGE  
PAID  
EDEN PRAIRIE, MN  
55344  
OCT 15, 15  
AMOUNT  
**\$6.15**  
00107618-07



20013



1008

Secretary of the Senate  
Office of Public Records  
P.O. Box 77578  
Washington, DC 20013-7578

Expected Delivery Day: 10/17/16



Label 107R, January 2008

USPS TRACKING NUMBER



9505 5110 7618 5288 5120 43

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED 1 \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL 10-15-15 \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☒

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

## OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE ☐ POSTMARK ☐

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

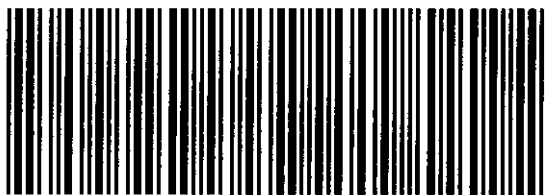
PREPARER DH DATE PREPARED 10-20-15

2/28/2015

201510210200301995



SEN PATCH



SEN PATCH

201510210200301996